NH Department of Safety Division of Motor Vehicles Motorcycle Rider Training Program

Please print clearly in ink:

**Student Information** 

## 2012 Course Registration Form



**Course Selection** 

When are you available to take the course? List as

Code   Dates   Locations	Last Name	First Name	M.I.			xt to the dates, list your of your preference.
Enviring Phone  Day-time Phone  Student Background  How much recent bicycle riding experience do you have?  None A Little Alot  Describe your previous motorcycling experience.  None Passenger Only Some Stress Riding Dint Bike Only  More than 2 years riding Done  Do you currently own a motorcycle? No Pyes  Do you currently hold one of the following:  NH Motorcycle License? No Pyes  NH Motorcycle License? No Pyes  Belknap Carroll Cheshire Coos Grafton  Hillsborough Merrimack Rockingham Strafford Sullivan  Please read the following and sign below: Participation in this course does not guarantee receiving a motorcycle endorsement. Successful completion of the course requires full attendance at every session and the successful completion of both a writen test and a riding skill evaluation. If you are unable to omplete the course or do not pass the evaluations, you will not receive a waiver of the DMV skills test. During the course, if you are unable to ompletion to first you are unable to omplet the course or do not pass the evaluations, you will not receive a waiver of the DMV skills test. During the course, if you are unable to ompletion of the course requirements accessary per Saf-C 5305.04  Signature:  Date:  Da				Code	Dates	Locations
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Date of Birth   Dinver Loense Number	City/Town	State				
Date of Birth   Driver License Number	Oity/10Wii	Otate	219			
E-mail Address (optional)  We will notify you of your class assignment by mail, please provide a current mailing address. List a day and evening telephone number where we can contact you for possible schedule changes. If you are under the age of 18, you must have a parent or guardian co-sign your registration form.  Student Background  How much recent bicycle riding experience do you have?  None A Little A lot bescribe your previous motorcycling experience.  None Passenger Only Some Street Riding Dirt Bike Only More than 2 years riding Other  Do you currently own a motorcycle? No Yes  Do you currently own a motorcycle? No Yes  NH Motorcycle License? No Yes  NH Motorcycle License? No Yes  Forhow korg?  NH Motorcycle License? No Yes  Belknap Carroll Cheshire Coos Grafton  Hillsborough Merrimack Rockingham Strafford Sullivan  Please read the following and sign below: Participation in this course does not guarantee receiving a motorcycle endorsement. Successful completion of the course requires full attendance at every session and the successful completion of both a written test and a riding skill evaluation. If you are unable to complete the course or do not pass the evaluations, you will not receive a waiver of the DMV skills test. During the course, if you are unable to meet the objectives of the training or if you put yourself or any other student at risk, the Instructor must dismiss you from the course. This course is non-transferable. If you were not able to attend your scheduled course and would like to requirements necessary per Saf-C 5305.04	Evening Phone	Daytime Phone				
E-mail Address (optional)  We will notify you of your class assignment by mail, please provide a current mailing address. List a day and evening telephone number where we can contact you for possible schedule changes. If you are under the age of 18, you must have a parent or guardian co-sign your registration form.  Student Background  How much recent bicycle riding experience do you have?  None A Little A lot bescribe your previous motorcycling experience.  None Passenger Only Some Street Riding Dirt Bike Only More than 2 years riding Other  Do you currently own a motorcycle? No Yes  Do you currently own a motorcycle? No Yes  NH Motorcycle License? No Yes  NH Motorcycle License? No Yes  Forhow korg?  NH Motorcycle License? No Yes  Belknap Carroll Cheshire Coos Grafton  Hillsborough Merrimack Rockingham Strafford Sullivan  Please read the following and sign below: Participation in this course does not guarantee receiving a motorcycle endorsement. Successful completion of the course requires full attendance at every session and the successful completion of both a written test and a riding skill evaluation. If you are unable to complete the course or do not pass the evaluations, you will not receive a waiver of the DMV skills test. During the course, if you are unable to meet the objectives of the training or if you put yourself or any other student at risk, the Instructor must dismiss you from the course. This course is non-transferable. If you were not able to attend your scheduled course and would like to requirements necessary per Saf-C 5305.04						
We will notify you of your class assignment by mail, please provide a current mailing address. List a day and evening telephone number where we can contact you for possible schedule changes. If you are under the age of 18, you must have a parent or guardian co-sign your registration form.    Student Background	Date of Birth	Driver License Number				
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□ None □ A Little □ A lot  Describe your previous motorcycling experience. □ None □ Passenger Only □ Some Street Riding □ Dirt Bike Only □ More than 2 years riding □ Other □ Do you currently own a motorcycle? □ No □ Yes  Do you currently own a motorcycle? □ No □ Yes  Do you currently hold one of the following:  NH Motorcycle Permit? □ No □ Yes  NH Motorcycle License? □ No □ Yes  NH Motorcycle License? □ No □ Yes  For how long?  How did you hear about this course?  In what NH County do you live? Please circle one:  Belknap Carroll Cheshire Coos Grafton  Hillsborough Merrimack Rockingham Strafford Sullivan  Please read the following and sign below: Participation in this course does not guarantee receiving a motorcycle endorsement. Successful completion of the course requires full attendance at every session and the successful completion of both a written test and a riding skill evaluation. If you are unable to complete the course or do not pass the evaluations, you will not receive a waiver of the DMV skills test. During the course, if you are unable to meet the objectives of the training or if you put yourself or any other student at risk, the Instructor must dismiss you from the course. This course is non-transferable. If you were not able to attend your scheduled course and would like to request a refund please see the requirements necessary per Saf-C 5305.04  Parent/Guardian Signature: □ Date:  Please read the following and sign below: Participation in this course does not guarantee receiving a motorcycle endorsement. Successful completion of the course is non-transferable. If you were not able to attend your scheduled course and would like to request a refund please see the requirements necessary per Saf-C 5305.04		•	20103			
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None   Passenger Only   Some Street Riding   Dirt Bike Only     More than 2 years riding   Other   Tall of your choices are full, we will return your registration and request that you add more dates.  Do you currently hold one of the following:   NH Motorcycle Permit?   No   Yes   For how long?     NH Motorcycle License?   No   Yes   For how long?     NH Woth Word you hear about this course?   No   Yes   For how long?     How did you hear about this course?   No   Yes   For how long?     In what NH County do you live? Please circle one:   Belknap Carroll Cheshire Coos Grafton     Hillsborough Merrimack Rockingham Strafford Sullivan     Please read the following and sign below: Participation in this course does not guarantee receiving a motorcycle endorsement. Successful completion of the course requires full attendance at every session and the successful completion of both a written test and a riding skill evaluation. If you are unable to complete the course or do not pass the evaluations, you will not receive a waiver of the DMV skills test. During the course, if you are unable to meet the objectives of the training or if you put yourself or any other student at risk, the Instructor must dismiss you from the course. This course is non-transferable. If you were not able to attend your scheduled course and would like to request a refund please see the requirements necessary per Saf-C 5305.04  Signature: Date:   Date:		rovoling experience				
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Do you currently own a motorcycle?			· ·			
NH Motorcycle Permit?						
Choose one of the following:  NH Motorcycle License?	Do you currently hold one of	the following:				
MH Motorcycle License?   No   Yes   For how long?	NH Motorcycle Permit? □ No □ Yes		ow long?	Choose or		
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	Signature:				Date:	
	Parant/Guardian Signati	iro:			Doto:	
	(For applicants under 18 years	old)			Dale	

## **Mail Completed Registration Form & Payment to:**

NH DEPARTMENT OF SAFETY DIVISION OF MOTOR VEHICLES ATTN: MOTORCYCLE RIDER PROGRAM 23 HAZEN DRIVE CONCORD, NH 03305

23 HAZEN DRIVE CONCORD, NH 03305	JEK I KOOKAW	DEALER INFORMATION:
Select Payment Option		
Returned check policy: We may re-present your checks provided to you with your bank	statement, but you can get a copy by contactin	MV"  Ifficient or uncollected funds. Your returned check will not be g your financial institution. Per RSA 6:11-a, A fee of \$25 or 5, will be charged for each returned check and collected with a
Credit card. Please pro	vide your credit card information	below:
Type of card  Visa  Master Card  American Express	Name of Card Holder: Billing Address:	Exp. Date:
For Office Use Only		